## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Thomas SCHMEHL et al.

Title: ATOMIZABLE LIPOSOMES

AND THEIR USE FOR THE

**PULMONARY** 

ADMINISTRATION OF ACTIVE SUBSTANCES

Appl. No.: 10/510,040

International

4/4/2003

Filing Date:

371(c) Date: 6/21/2005

Examiner: Isaac Shomer

Art Unit: 1612

Confirmation 4643

Number:

## **AMENDMENT TRANSMITTAL**

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [X] Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a previous assertion of Small Entity status.
- [X] Also enclosed is an Information Disclosure Statement and PTO/SB/08 along with a credit card payment in the amount of \$180.00.
  - [X] The fee required for additional claims is calculated below:

Claima	Previously	Extra	Rate	Additional
Claims				

 $\frac{\$156.00}{\$78.00}$ 

\$180.00

\$258.00

	As		Paid For		Claims				Claims Fee
	Amended				Present				
Total Claims:	42	-	39	=	3	х	\$52.00	=	\$156.00
Independent Claims:	2	-	3	=	0	x	\$220.00	=	\$0.00
First p	presentation	of an	y Multiple	Depend	ent Claims:	+	\$390.00	= -	\$0.00
					CLAIMS	S FE	E TOTAL	=	\$156.00
	hereby petit				time under 3	37 C.	F.R. §1.13	6(a)	for the
] Extension fo	Extension for response filed within the first month:						\$130.00		\$0.00
] Extension fo	] Extension for response filed within the second month:						\$490.00	•	\$0.00
Extension fo	] Extension for response filed within the third month:						51,110.00	•	\$0.00
] Extension for response filed within the fourth month:						\$	51,730.00	•	\$0.00
Extension for response filed within the fifth month:						9	52,350.00	•	\$0.00
				E	KTENSION	FEE	TOTAL:		\$0.00
[ ] Statutory Di	atutory Disclaimer Fee under 37 C.F.R. 1.20(d):								\$0.00

CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:

Small Entity Fees Apply (subtract ½ of above):

Information Disclosure Statement Fee:

TOTAL FEE:

A credit card payment form in the amount of \$258.00 is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

[X]

Atty. Dkt. No. 080618-0576 Appl. No. 10/510,040

If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date October 22, 2009

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